BOARD OF NURSE REGISTRATION AND NURSING EDUCATION OPEN SESSION MINUTES

December 09, 2013

A meeting of the Rhode Island Board of Nurse Registration and Nursing Education Board was held on Monday, December 09, 2013 at 8:45 am in Room 401 of the Rhode Island Department of Health.

BOARD MEMBERS IN ATTENDANCE

Jessica Brier Michelle CahillLinda DamonMarie JeanPeggy MattesonMaria PezzilloManuela RaposoAnne Tierney Kristen Young

BOARD MEMBERS NOT IN ATTENDANCE

Carol Cairns

Adele Palazzo

Linda Twardowski

Diane Blier

STAFF MEMBERS IN ATTENDANCE

Donna Valletta, Board Administrator

Twila McInnis, Director of Nurse Registration & Education, Board of Nursing

Andelys Liranzo, Case Manger

Donna Costantino, Chief, Health Professionals Regulation

James McDonald M.D, Board of Medical Licensure and Discipline Dan Ballirano, Legal Counsel Gary Pellicano, Legal Counsel

OTHERS IN ATTENDANCE

Ann-Marie Simard, Lincoln TechLinda McDonald Chris Gadbois, RISNA David Becker, NEIT Donna Policastro, RISNA/ANA Eleanor Clapprood, RISNA NP Council Ruth Ricciarelli, CTR Health Proessions/HARI Sylvia Weber-RISNA

OPEN SESSION MINUTES

8:57 am CALL TO ORDER

1.0 9:05 am MINUTES - December 09, 2013

Motion: Marie Jean Second: Michelle Cahill

2.0 9:10 am ADMINISTRATIVE ANNOUNCEMENTS

PRESIDENT'S REPORT

- Ø Reviewing of Medical Assistants and their Scope of Practice
- Ø PMP Prescription Monitoring Program assists providers when prescribing
- Ø RI PMP.com Enrollment process
- Ø RI Medical Society Journal available to all. Articles are authored by interdisciplinary colleagues and often address items of interest across the health care process.
- Ø First issue of Nursing Connections of the Board of the Board of Nurse Registration and Nursing Education scheduled to be published in mid-January and sent electronically to all nurses holding RI licenses.

DIRECTORS REPORT

- Ø HIV Update
- Ø Hepatitis C
- Ø Introduction of Option C for Nurse Licensure Compact

BUSINESS

President Matteson shared with the Board of Nursing (BON) some of the activities that the Board of Medicine has discovered that Medical Assistants (MAs) are engaging in during direct patient care. President Matteson reiterated that she and Director McInnis have been attending the monthly meetings of the BOM and also participated in discussions with the BOM exploring what it is that MAs are realistically prepared to do. It is apparent that MAs are being hired to provide patient services that fall within the realm of the practice of

nursing (filling positions formerly filled by nurses) yet MAs are unlicensed.

Doctor James McDonald, Director of the BOM explained to the BON that as colleagues in direct health care the BOM believes that it is imperative that the boards be in discussion and share information on a number of topics. The BOM wants to inform their licensed personnel that they are responsible for the care he/she directs a MA to provide.

The responses received in response to the community review of the draft documents of the BOM related to MAs will be shared between the Boards before a final document is created by the BOM for physicians and PAs and by the BON for LPNs, RNs, and APRNs from the BON.

BOARD OF NURSING REGISTRATION AND NURSING EDUCATION
WORK GROUPS 2013-2014

RULES AND REGULATION FOR PUBLIC HEARING WORK GROUP

Ø The new Rules and Regulation are still in process of being edited
and updated by Board members Certified Registered Nurse
Anesthetist Anne Tierney and APRN Jessica Brier. Linda Damon

stated that their efforts have been exemplary and that they are true champions of the Advanced Practice Nursing role. A first draft may be ready for the Board members by mid-January.

EDUCATION WORK GROUP

Ø Maria Pezzullo led the site visit to Lincoln Technical Institute and has submitted the final report to the Director of the Board of Nursing.

Ø In January the Education sub-committee will review the annual reports from the nursing education programs in the state and report to the Board at the February meeting.

SKILLS REMEDIATION WORK GROUP

- Ø This sub-committee continues to do a needs assessment concerning for a program or programs that can:
- 1. Offer remediation on clinical skills to nurses who have been referred to the Board because of practice issues and when the process is completed certify that a nurse is competent to return to practice, possibly with suggested supervision and/or restrictions. The process would work similar to the process followed with Diversion contracts for nurses with drug and alcohol issues. The BOD has a contract with a company that currently provides this service for them and also provides the service to nurses.
- 2. Offer remediation on general clinical practice for nurses who have been away from direct patient care for more than 1 year. The 1-year time frame was established because this is the standard that the

Human Resource departments of local hospitals follow.

Ø Kristen Young, a member of this work group informed the Board of Nursing that the States of Massachusetts and Connecticut have had refresher courses offered within their states in the past.

3.0 9:11 am NEW BUSINESS

Ø Board of Nursing is exploring the possibility of out-sourcing the initial licensing process. Director McInnis explained to the Board that the licensing unit only has one person to complete the licensing of all nurses for the state of Rhode Island due to the shortage of staff.

The Human Resource departments of various facilities have stated that they have not been able to complete the hiring process of desired employees because the issuing of a RI license to a nurse who is licensed in another state, a non-compact states is often delayed too long.

Director McInnis explained that the delay is often due to the occurrence of incomplete applications, often not the fault of the applicant but of the educational institution he/she attended. Official transcripts must be sent directly to the BON so licensing candidates do not know when these documents are missing. The lack of personnel prevents the DOH from contacting applicants about the omission of information and the applicants become frustrated

because they do not know why it is taking so long to get their RI license.

The good news is that the Licensing process is currently in order and up to date. However, this status will be challenged this spring as the applications from the December graduates will be received and the every 2-year renewal process of 10,000 currently licensed in RI nurses will occur while the on-going requests for new RI licenses from out-of-state nurses continues.

COMMUNITY COMMENTS

Ø Donna Policastro from RISNA asked what are the boundaries for lab tests and evaluations for the HIV/ HEP C and if there were insurance providers in attendance at the conference related to this topic that was held at Brown University. Director McInnis responded that she did not know.

Ms Policastro also asked if the BOM and the BON had a time line for the community comments for Rules and Regulations. The Work Group responded that it could not provide an exact date but that it would be sometime in the spring of 2014.

4.0 10:30 AM MOTION TO ADJOURN- Jessica Brier 2nd-Linda Damon

5.0 10:30 am ADJOURN TO CLOSED SESSION

Pursuant to Sections 42-46-4 and 42-46-5 of the Rhode Island General Laws, for the purpose of discussing job performance, character, physical or mental health of applicants for licensure and licensees; investigatory proceedings relating to misconduct by applicants for licensure and licensees, and investigatory proceedings regarding allegations of civil or criminal misconduct. Said individuals have been notified in advance in writing that they may request that the discussion be held at an open meeting